



Related Medlearn Matters Article #: MM4217

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### *Reminder Notice of the Implementation of the Ambulance Transition Schedule*

#### Key Words

MM4217, CR4217, Transmittal R799CP, reminder, notice, ambulance, transition, schedule

#### Provider Types Affected

Ambulance providers and suppliers

#### Key Points

- The effective date of the instruction is January 1, 2006.
- The implementation date is January 3, 2006.
- During the current calendar year (CY) 2005, year four of a five-year transition to the ambulance fee schedule implementation, payment for ambulance services is based on a blend of 80 percent of the fee schedule amount plus 20 percent of the provider's reasonable cost or the supplier's reasonable charge for the service.
- As of **January 1, 2006**, the Medicare **allowed amount is based solely on the ambulance fee schedule (100%)** for ambulance services furnished and mileage incurred on or after January 1, 2006.
- The fee schedule applies to **ALL** ambulance services furnished as a benefit under Medicare Part B, including volunteer, municipal, private, independent, and institutional providers; i.e., hospitals, critical access hospitals (CAHs), and skilled nursing facilities (SNFs).
- Ambulance providers and suppliers are required to accept assignment and must accept Medicare allowed charges as payment in full.
- They may not bill or collect from the beneficiary any amount other than any unmet Part B deductible and the Part B coinsurance amounts.
- Effective January 1, 2006, the full fee schedule comprises the entire Medicare allowed amount, and no portion of the provider's reasonable cost or the supplier's reasonable charge will be considered.
- Temporary Q codes (Q3019 (ALS Vehicle Used, Emergency Transport, No ALS Services Furnished), Q3020 (ALS Vehicle Used, Non-Emergency Transport, NO ALS Level Services Furnished), and HCPCS code A0800 (Ambulance Night Differential Charges) may no longer be used for claims with

dates of service on or after January 1, 2006. These codes were only for use during the transition period for the fee schedule.

- Medicare carriers and intermediaries will deny claims for separately billed supplies and ancillary services furnished during an ambulance transport on or after January 1, 2006.
- Supplies and ancillary services are considered part of the fee schedule base rate and are not separately billable after December 31, 2005.

### Important Links

<http://www.cms.hhs.gov/MedlearnMattersArticles/downloads/MM4217.pdf>

<http://www.cms.hhs.gov/transmittals/downloads/R799CP.pdf>

If you have any questions, please contact your carrier at their toll-free number, which may be found at <http://www.cms.hhs.gov/apps/contacts> on the CMS web site.